

CONSOLIDATED PLAN CONSISTENCY VERIFICATION

Sponsors of projects which will be sited within the city of Rockford's corporate city limits and covered by a HUD-approved Housing and Community Development Consolidated Plan (H&CD Plan) must verify that the project is consistent with the Plan when applying for certain Federal and state housing dollars. Verifications of consistency with the current City of Rockford H&CD Plan will be issued by the City of Rockford Community Development Department, acting as the lead for this jurisdiction.

A request for verification of H&CD Plan consistency must be submitted in writing to the CDBG/HOME Program, Community Development Department, 425 East State Street, Rockford, IL 61104. The request must contain a brief description of the project, which includes the following:

1. The name of the agency and owner sponsoring the project. Any consultant being used to make applications or undertake development on behalf of the project sponsor should also be identified. Tell us about your agency and include the number of projects you have completed and their location. Also include your experience with similar projects?
2. A complete project narrative or Executive Summary is preferred and type of units (by bedroom size). Include the nature of the project (new construction, acquisition, or rehabilitation) and the number of units that will be developed or the number of households that will be served. Explain how this is or is not consistent with Rockford's Consolidated Plan (found online at rockfordil.gov).
3. The affordability level that will be achieved (affordable to households at 50% of median income, for example). Provide an explanation of how this project fits or does not fit into Rockford's long-term goals of reducing poverty and increasing home ownership.
4. Where the project will be sited. If the specific site is not yet known, the project sponsor should indicate the general area in which a site will be sought. (For example, geographical area in which the site search will focus).
5. Homeless, formerly homeless, mentally ill, and/or other subpopulation to be served.
6. A description of any supportive services that will be provided to projected residents, and the identification of any agencies or organizations other than the project sponsor that will be involved in the provision of such services.
7. All sources of funds expected to be used to develop and/or operate the housing project supported by a Sources and Uses statement (if "draft", note as such).
8. Are there program requirements that may have a positive or negative effect on the neighborhood in which this project will be/is located or Rockford in general?

When the City Community Development Department receives a request for H&CD Plan consistency for a project located in the city of Rockford, the Community Development Department will review and forward a copy of to the Mayor of the City of Rockford for consideration of support.

The City requires a minimum of two weeks to prepare a response to a request for verification of H&CD Plan consistency. Therefore, requests should be submitted to the City of Rockford Community Development Department at least two weeks prior to the application deadline of any fund source which

requires a verification of H&CD Plan consistency. Failure to do so may result in the verification of H&CD Plan consistency being unavailable at the time funding applications are due.

Questions on the certification process should be directed to Vicki Manson, Development Programs Manager for the City of Rockford at 815-967-6759.

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.
(Type or clearly print the following information:)

Applicant Name: _____

Project Name: _____

Location of the Project: _____

Name of the Federal
Program to which the
applicant is applying: _____

Name of
Certifying Jurisdiction: _____

Certifying Official
of the Jurisdiction
Name: _____

Title: _____

Signature: _____

Date: _____